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UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT					FORM A Page 1 of 5 For use by Members, officers, and employees AND DELIVERED			
		David Wayne Loebsack (Full Name)			202-225-6576	MAY 13 PM 2: 02		
Filer Status Member of the U.S. State: IA House of Representatives District: 02			1 1 1	Officer Or Employing Office: Employee .	A \$200 penalty shall be assessed against anyone who files			
F	Report Type	Annual (May 15)	nent 🔲 Te	ermina	Termination Date: tion	more than 30 days late.		
PF	RELIMINAF	Y INFORMATION ANSWER	EACH OF THE	SE C	QUESTIONS			
l.	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise Yes No very sempt)? If yes, complete and attach Schedule VI. Did you, your spouse, or a dependent child receive any reportable travel or							
II.	II. you for a speech, appearance, or article in the reporting period? Yes No VII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$335 Yes No VIII. relimbursements for travel in the reporting period (worth more than \$33							
111.	more than \$200 more than \$1,00	ouse, or a dependent child receive "unearned" inc n the reporting period or hold any reportable asset o at the end of the period? te and attach Schedule III.	me of worth Yes 🕢 No	• 🗆	Did you hold any reportable positions on or before the date of fill vill. current calendar year? If yes, complete and attach Schedule VIII.	ling in the Yes No 🗸		
IV.	reportable asset period?	ouse, or dependent child purchase, sell, or exchaning a transaction exceeding \$1,000 during the reporter and attach Schedule IV.	ge any ting Yes 🗹 No	• 🗆	Did you have any reportable agreement or arrangement with an entity?	outside Yes ☐ No ☑		
v.	Did you, your sp than \$10,000) du	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes No V Each question in this part must be answered and the appropriate						
		te and attach Schedule V.			schedule attached for each "Yes" response.			
EX	CLUSION	OF SPOUSE, DEPENDENT, O	R TRUST INFO	DRM/	ATION ANSWER <u>EACH</u> OF THESE QUE	STIONS		
	Trusts-	Details regarding "Qualified Blind Trus disclosed. Have you excluded from thi	s" approved by the C s report details of suc	ommit ch a tru	tee on Ethics and certain other "excepted trusts" need not be st benefiting you, your spouse, or dependent child?	Yes ☐ No 🗸		
	Exemptions	,	other assets, "unear emption? Do not ans	ned" in swer "y	come, transactions, or liabilities of a spouse or dependent cl es" unless you have first consulted with the Committee on Et	hild thics. Yes ☐ No 🗸		

SCHEDULE I - EARNED INCOME

Name David Wayne Loebsack

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Туре	Amount
lowa Public Employees Retirement Pension	Spouse Pension	n/a

BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e.,plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting	Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
CREF Bond Market	\$1,001 - \$15,000	CAPITAL GAINS	\$201 - \$1,000	
CREF Equity Index	\$1,001 - \$15,000	CAPITAL GAINS	\$201 - \$1,000	
CREF Global Equities	\$15,001 - \$50,000	CAPITAL GAINS	\$1,001 - \$2,500	
· CREF Growth	\$15,001 - \$50,000	CAPITAL GAINS	\$2,501 - \$5,000	
CREF Money Market	\$1,001 - \$15,000	CAPITAL GAINS	\$1 - \$200	
CREF Stock	\$15,001 - \$50,000	CAPITAL GAINS	\$1,001 - \$2,500	

SCHED	HEDULE III - ASSETS AND "UNEARNED" INCOME			Name David Wayne Loebsack			
	TC Lifecycle Fund 2020	1 .	00,001 - 50,000	CAPITAL GAINS	\$5,001 - \$15,000		
	TC Lifecycle Fund 2025	I .	5,001 - 0,000	CAPITAL GAINS	\$2,501 - \$5,000		
	TIAA Real Estate	' '	001 - 5,000	Capitol Losses	\$201 - \$1,000		
	TIAA Traditional	1 -	5,001 - 0,000	INTEREST	\$1,001 - \$2,500		
SP	Vanguard Extended Market Index Fund		001 - 5,000	DIVIDENDS	\$201 - \$1,000		
SP	Vanguard Intermediate Term Bond Index		001 - 5,000	DIVIDENDS	\$1,001 - \$2,500	S(part)	
SP	Vanguard Long Term Bond Index	1	001 - 5,000	DIVIDENDS	\$201 - \$1,000		
SP	Vanguard Prime Money Market Fund		001 - 5,000	DIVIDENDS	\$1 - \$200		
SP	Vanguard Prime Money Market Fund		5,001 - 0,000	DIVIDENDS	\$1 - \$200		
SP	Vanguard Short Term Investment Grade Fund	1 '	5,001 - 0,000	DIVIDENDS	\$1,001 - \$2,500		
SP.	Vanguard VBS Stock Holdings		5,001 - 0,000	DIVIDENDS	\$201 - \$1,000		

SCHEDULE IV - TRANSACTIONS

Name David Wayne Loebsack

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
SP	Vangaurd Intermediate Term Bond Index	S(part)	No	7/20/2010	\$15,001 - \$50,000